



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Frederick D. SANCILIO et al.
Title: NARCOTIC-NSAID ION PAIRS
Appl. No.: 10/796,308
Filing Date: 03/10/2004
Examiner: Unassigned
Art Unit: Unassigned

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(2nd. pg.)

TRANSMITTAL OF MISSING PARTS
OF PATENT APPLICATION

Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Notice to File Missing Parts of Application mailed 06/01/2004, in the above-identified application, transmitted herewith are the missing parts to complete the filing of the subject patent application.

Enclosed are:

- ☒ [X] Return Copy of Notice to File Missing Parts (2 pages)
- ☒ [X] Declaration and Power of Attorney (8 pages)
- ☒ [X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:
 - ☒ [X] Extension for response filed within the first month
 - ☐ [] Extension for response filed within the second month
 - ☐ [] Extension for response filed within the third month
 - ☐ [] Extension for response filed within the fourth month
 - ☐ [] Extension for response filed within the fifth month

8/13/2004 EABUBAK1 00000023 10796308

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The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$770.00	\$770.00
Total	160	- 20	= 140	x \$18.00	= \$2,520.00
Claims:					
Independ	1	- 3	= 0	x \$86.00	= \$0.00
ents:					
If any Multiple Dependent Claim(s) present:				+ \$290.00	= \$0.00
Surcharge under 37 CFR 1.16(e) for late filing of				+ \$130.00	= \$130.00
Executed Declaration and late payment of filing fee					
[X] Extension fee for response filed within				+ \$110.00	= \$110.00
the first month:					
				SUBTOTAL:	= \$3,530.00
[] Small Entity Fees Apply (subtract 1/2 of above):					= \$0.00
				TOTAL FILING FEE:	= \$3,530.00
				TOTAL FEE	= \$3,530.00
Difference to pay:				- \$0.00	- \$3,530.00

[X] Check in the amount of \$3,530.00 in payment of
surcharge fee (37 C.F.R. § 1.16(e))

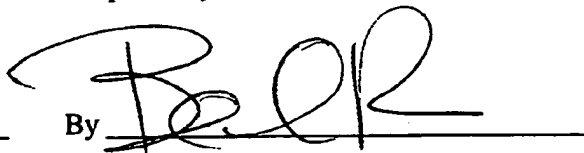
The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Respectfully submitted,

Date

11 August 2004

By



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